British Medical Journal Supplement

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WAS IT A DRUG?

NEUTRAL SOAP FOR DERMATITIS

At a recent prescribing appeal the referees decided that "neutrogena" soap prescribed by a doctor for a case of disseminated neurodermatitis was a preparation which the executive council was bound to provide.

On three occasions a doctor prescribed one tablet of neutrogena soap for a patient suffering from disseminated neurodermatitis. The executive council referred to the local medical committee the question whether this soap was a drug which it was bound to provide under the N.H.S. The Committee decided that it was not, and the doctor appealed to the referees.

In giving their decision the referees stated that if the patient had washed with ordinary soap its alkaline ingredients would have irritated the skin. If he had not washed at all he would have been predisposed to secondary infection and to the psychological effects of being always dirty. Neutrogena soap was not only non-alkaline but it also removed the crusts caused by the dermatitis and had an optimum soothing effect due to the inclusion of triethanolamine and glycerin in its composition. The doctor had studied reports on clinical tests described in the *British Medical Journal*.[1] Cetrimide, which was included in the *National Formulary*, had somewhat similar properties, but the doctor thought that neutrogena soap was better for the patient, and the referees thought he was entitled to use his judgment. They decided that neutrogena soap was in this case a drug which the executive council was bound to provide.

HOSPITALITY

Inquiries have been received from doctors from many parts of the United States who wish to send their teen-age children on exchange visits to the U.K. Would any British doctors interested in such an arrangement please send inquiries to Dr. R. A. Pallister, International Medical Advisory Bureau, B.M.A. House, London W.C.1,

TRADE UNION MEMBERSHIP

The following local authority is understood to require employees to be members of a trade union or other organization:

Non-County Borough Councils.—Crewe.

Dangerous Drugs Act: Withdrawal of Authority

The Home Office announces that Dr. William Quirke (Co. Kildare, Eire) is no longer authorized to be in possession of or to prescribe those drugs to which the Dangerous Drugs Regulations 1953, apply.

[1] Martin-Scott, I., and Ramsay, A. G., *Brit. med. J.*, 1956, **1**, 1525.

Correspondence

Because of heavy pressure on our space, correspondents are asked to keep their letters short.

G.P. Working Party's Report

SIR,—Judging by the report of the proceedings of council (August 27, p. 89), some members appear very sceptical of Recommendation XV of the Working Party that £1m. should be reserved for further consideration. To my mind, this is the one gleam of hope for the future that we might become less reliant on the capitation system, as the recommendation goes on to say that "consideration can be given to methods of making the best possible general medical service available to the public."

I would go further and suggest that the Working Party, which is to consider this, should also consider incorporating the £500,000 voted by the Royal Commission to the same end. Surely this sum mentioned by the Royal Commission as a reward for outstanding medical services is really aiming at the same thing as Recommendation XV. A combined scheme incorporating both recommendations should be well within the bounds of possibility.—I am, etc.,

Cambridge. A. A. CRAIGEN.

SIR,—Whatever the merits of the proposed new distribution scheme, the practitioner who cannot get his full share of midwifery will continue to be underpaid—according to the findings of the Royal Commission.—I am, etc.,

R. W. COCKSHUT.

Retrospective Pay for Assistants

SIR,—I read with puzzled scepticism (August 27, p. 85) the proposals for helping assistants to share in the general rejoicing to come. The plan and method as outlined will simply ensure that the just and generous principals will be a good deal poorer than the unjust and ungenerous. As for the assistants, those workers in an arduous and honourable profession will be rewarded on a basis that compares unfavourably with the achievement of ERNIE; for that sense of impartiality which lends a philosophic calm to the minds of unsuccessful gamblers will be lacking.

The sanctity of personal contract is a valuable ideal, but will it really be strengthened by making it the groundwork of widespread injustice to both principals and assistants? The employer's contribution to superannuation is already paid direct by the executive council. Could this not provide a basis for assessing retrospective payments? Experience shows that in matters of service the voluntary principle is generally wise, fair, and satisfying, but that in matters of money payments it is a source of discord and dishonour.—I am, etc.,

MICHAEL CLAY.

Port Talbot.

Compensation and Superannuation

SIR,—The Working Party have done a good job. It is to be hoped that they, or a similar body, will turn their critical attention in due course to the problems of adequate interest on practice compensation and superannuation. I want to be brief and my computations are rough, but I reckon that if I had been paid compensation in 1948 I would have doubled the capital sum by investment and received treble the interest in the meantime. There is a clamant case for a substantial increase in the interest rate.

The present superannuation scheme is out of touch with reality, and every doctor in practice has something here to think about seriously. The least that any of us could live on reasonably after retirement is an annual sum in the region of £1,000. To earn this pension at present rates we each would have to gross £100,000 in our working lives, and not everyone will reach this mark or near it. In my opinion the superannuation scheme is worse than mean and should be revised at once.—I am, etc.,

Strichen, Aberdeenshire. WILLIAM HARKINS.

B.M.A. Car Badge

SIR,—Having just received one of the B.M.A. blue parking badges I was disappointed to find that the windscreen of my car, in common with most others, is curved to such an extent that the only flat surface is directly in front of me. Also there is a gap between the front surface of the badge and the flat surface to which it adheres due to the thickness of the flange of the metal holder. This allows the cellulose strip to fall out of place.

The first difficulty I have overcome by attaching the badge to a piece of perspex instead of the windscreen, and the second difficulty was overcome by pasting some cardboard to the back of the strip to double its thickness.

I feel that the designer of the badge has not given the detailed thought to the design that he would have expected his own doctor to show had the designer been in need of his services.—I am, etc.,

Liverpool 6. B. JOHN MAXWELL.

Hospital Service Plan

SIR,—In our experience and that of the committee which devised the special scheme for members of the B.M.A., cases in which charges are made by professional colleagues are extremely rare, and the traditional relationship is usually observed.

However, it will be seen in the descriptive booklet that alternative higher-rated schemes at special group rates of contribution are also available to cater for the very circumstances cited by Dr. P. H. Deeny (August 13, p. 68).—I am, etc.,

Tunbridge Wells. D. B. JARRETT,
Public Relations Officer,
The Hospital Service Plan.

SIR,—Reports of formal bills sent to professional brethren, quoted by Dr. P. H. Deeny, and his own experience (August 13, p. 68) must amaze and horrify consultants and general practitioners alike. Such actions appear indefensible, and so far no defence of this abandonment of a noble tradition has been put forward. Even though it appears to be a recognition of falling standards in behaviour, let us have an agreement as he suggests. Could we not, at the same time, arrange a confidential black-list of these operation-pedlars to ensure that no more private work is referred to them in future ?—I am, etc.,

Shrewsbury. E. N. OWEN.

Democratic Jig-saw Puzzle

SIR,—What an apt description in your leading article of August 27 (p. 654). Unfortunately it was a badly cut jig-saw puzzle, with several pieces missing, and certainly a most expensive one, which has already cost the profession many thousands of pounds in lost interest on much-needed money.—I am, etc.,

London, S.W.16. DAVID ALLEN.

Association Notices

ELECTION OF MEMBERS OF COUNCIL

Northern Ireland Branch (Group 31)

D. L. W. Chapman, Belfast, has been elected unopposed for the remainder of the Session 1960–1.

East Yorkshire Branch and Yorkshire Branch (Group 2)

T. K. Cooke, Kirbymoorside, and C. B. McClintock, Castleford, have been nominated.

Branches in the Republic of Ireland

T. J. Coffey, Dublin, and Andrew McCarthy, Kinnegad, Co. Westmeath, have been nominated.

Voting papers were issued on September 9, 1960, to the members in the Groups where there are contests.

D. P. STEVENSON,
Secretary.

PROPOSED ARMAGH AND WEST DOWN DIVISION

Notice is hereby given by the Council to all concerned of a proposal to form an Armagh and West Down Division by amalgamating the County Armagh Division with the West Down Division. Any member affected by this proposal and objecting thereto is requested to write to the Secretary of the Association by October 8, 1960.

D. P. STEVENSON,
Secretary.

Diary of Central Meetings

SEPTEMBER

13	Tues.	Joint Consultants Committee, 11.15 a.m.
14	Wed.	Remuneration Subcommittee of Staff Side of Whitley Committee C, 11.30 a.m.
14	Wed.	Staff Side of Whitley Committee C, 2 p.m.
14	Wed.	Subcommittee on Misuse of Power (C.C. and S Committee), 2 p.m.
15	Thurs.	G.M.S. Committee, 10.30 a.m.
16	Fri.	Accident Services Review Committee, 2.30 p.m.
21	Wed.	Training Subcommittee, Occupational Health Committee, 2 p.m.
23	Fri.	Committee of Management, Annual Clinical Meeting, Canterbury, 1961, 3.30 p.m.
27	Tues.	**Special Conference of Representatives of Local Medical Committees,** 10.30 a.m.
28	Wed.	**Special Representative Meeting,** 10 a.m.
29	Thurs.	Grants Subcommittee, Organization Committee, 11.15 a.m.
29	Thurs.	Overseas Committee, 2.15 p.m.

OCTOBER

5	Wed.	Private Practice Committee, 11.30 a.m.
20	Thurs.	G.M.S. Committee, 10.30 a.m.

Branch and Division Meetings to be Held

The following meetings of Branches and Divisions are being called to consider the Council's recommendations on the Working Parties' reports:

KINGSTON-ON-THAMES DIVISION.—At Kingston Hospital, Tuesday, September 20, 8.30 p.m.

SALISBURY DIVISION.—At Salisbury Infirmary, Tuesday, September 13, 8.30 p.m.

SOUTH MIDDLESEX DIVISION.—At Red Lion, Hounslow, Thursday, September 22, 8.30 p.m.

COVENTRY DIVISION.—At Coventry and Warwickshire Hospital (Physiotherapy Department), Tuesday, September 13, 8 p.m. Talk by Dr. T. M. Clayton (Medical Officer of Health) and Dr. E. S. Stern (Medical Superintendent, Central Hospital and Leigh House) on changes in Local Authority Mental Health and Hospital Services resulting from the Royal Commission's recommendations and the Mental Health Act.

Branch and Division Officers Elected

GAMBIA BRANCH.—President, Dr. S. H. O. Jones. Honorary Secretary, Dr. R. F. Payne.

NORWICH DIVISION.—Chairman, Dr. M. F. Ronayne. Vice-chairman, Dr. G. S. Barradell-Smith. Honorary Secretary, Dr. R. H. Scott. Honorary Treasurer, Dr. J. F. Bennett.

WORCESTERSHIRE AND HEREFORDSHIRE BRANCH.—President, Dr. O. J. C. Cotton. President-elect, Mr. G. H. Marshall. Vice-president, Dr. Carmichael Mackie. Honorary Secretary and Treasurer, Dr. A. A. Vickers.

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